

7-16-01

07/13/01

PTO/SB/05 (4/98)

Please type a plus sign (+) inside this box → ☒Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. **ARC 2300N2**First Inventor or Application Identifier **Sonya MERRILL**Title **HYDROMORPHONE THERAPY**Express Mail Label No. **EL523935288US****APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages **48**]
(preferred arrangement set forth below)
- Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **10**]
4. Oath or Declaration [Total Pages **3**]
- a. ☐ Newly executed (original or copy)
- b. ☒ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
- i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers (cover sheet & document(s))
8. ☒ 37 C.F.R. § 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
9. ☐ English Translation Document (if applicable)
10. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☒ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
13. ☐ * Small Entity Statement filed in prior application (PTO/SB/09-12) ☐ Status still proper and desired
14. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
15. ☐ Other: _____

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: **09/244,188**

Prior application information: Examiner **SHARAREH, S.**

Group / Art Unit: **1619**

For **CONTINUATION** or **DIVISIONAL** APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

22921

or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

| | | | | | |
|---------|--|-----------|---------------------|----------|---------------------|
| Name | ALZA CORPORATION | | | | |
| Address | 1900 CHARLESTON ROAD M/S M10-3B | | | | |
| City | MOUNTAIN VIEW | State | CA | Zip Code | 94043 |
| Country | USA | Telephone | 650-564-4193 | Fax | 650-564-2195 |

| | | | |
|-------------------|----------------------|-----------------------------------|----------------|
| Name (Print/Type) | JOHN A. DHUEY | Registration No. (Attorney/Agent) | 26,265 |
| Signature | <i>John A. Dhuey</i> | Date | 8-13-01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$2,762.00)

Complete if Known

Application Number
Filing Date
First Named Inventor Sonya MERRILL
Examiner Name SHARAREH, S.
Group / Art Unit 1619
Attorney Docket No. ARC 2300N2

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-1173
Deposit Account Name ALZA Corporation
☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Fee Code (\$) | Entity Fee Code (\$) | Small Fee Code (\$) | Fee Description | Fee Paid |
|---------------------|----------------------|---------------------|---------------------------|----------|
| 101 | 690 | 201 | 345 Utility filing fee | 710.00 |
| 106 | 310 | 206 | 155 Design filing fee | |
| 107 | 480 | 207 | 240 Plant filing fee | |
| 108 | 690 | 208 | 345 Reissue filing fee | |
| 114 | 150 | 214 | 75 Provisional filing fee | |

SUBTOTAL (1) (\$710.00)

2. EXTRA CLAIM FEES

Extra Claims Fee from below Fee Paid
Total Claims 54 -20** = 34 x 18 = 612
Independent Claims 21 - 3** = 18 x 80 = 1440
Multiple Dependent = 0

**or number previously paid, if greater; For Reissues, see below

| Large Fee Code (\$) | Entity Fee Code (\$) | Small Fee Code (\$) | Fee Description | Fee Paid |
|---------------------|----------------------|---------------------|--|----------|
| 103 | 18 | 203 | 9 Claims in excess of 20 | |
| 102 | 78 | 202 | 39 Independent claims in excess of 3 | |
| 104 | 260 | 204 | 130 Multiple dependent claim, if not paid | |
| 109 | 78 | 209 | 39 ** Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 ** Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$2,052.00)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Fee Code (\$) | Entity Fee Code (\$) | Small Fee Code (\$) | Fee Description | Fee Paid |
|---------------------|----------------------|---------------------|---|----------|
| 105 | 130 | 205 | 65 Surcharge - late filing fee or oath | 0.00 |
| 127 | 50 | 227 | 25 Surcharge - late provisional filing fee or cover sheet | 0.00 |
| 139 | 130 | 139 | 130 Non-English specification | 0.00 |
| 147 | 2,520 | 147 | 2,520 For filing a request for reexamination | 0.00 |
| 112 | 920* | 112 | 920* Requesting publication of SIR prior to Examiner action | 0.00 |
| 113 | 1,840* | 113 | 1,840* Requesting publication of SIR after Examiner action | 0.00 |
| 115 | 110 | 215 | 55 Extension for reply within first month | 0.00 |
| 116 | 380 | 216 | 190 Extension for reply within second month | 0.00 |
| 117 | 870 | 217 | 435 Extension for reply within third month | 0.00 |
| 118 | 1,360 | 218 | 680 Extension for reply within fourth month | 0.00 |
| 128 | 1,850 | 228 | 925 Extension for reply within fifth month | 0.00 |
| 119 | 300 | 219 | 150 Notice of Appeal | 0.00 |
| 120 | 300 | 220 | 150 Filing a brief in support of an appeal | 0.00 |
| 121 | 260 | 221 | 130 Request for oral hearing | 0.00 |
| 138 | 1,510 | 138 | 1,510 Petition to institute a public use proceeding | 0.00 |
| 140 | 110 | 240 | 55 Petition to revive - unavoidable | 0.00 |
| 141 | 1,210 | 241 | 605 Petition to revive - unintentional | 0.00 |
| 142 | 1,210 | 242 | 605 Utility issue fee (or reissue) | 0.00 |
| 143 | 430 | 243 | 215 Design issue fee | 0.00 |
| 144 | 580 | 244 | 290 Plant issue fee | 0.00 |
| 122 | 130 | 122 | 130 Petitions to the Commissioner | 0.00 |
| 123 | 50 | 123 | 50 Petitions related to provisional applications | 0.00 |
| 126 | 240 | 126 | 240 Submission of Information Disclosure Stmt | 0.00 |
| 581 | 40 | 581 | 40 Recording each patent assignment per property (times number of properties) | 0.00 |
| 146 | 690 | 246 | 345 Filing a submission after final rejection (37 CFR § 1.129(a)) | 0.00 |
| 149 | 690 | 249 | 345 For each additional invention to be examined (37 CFR § 1.129(b)) | 0.00 |
| Other fee (specify) | | | | 0.00 |
| Other fee (specify) | | | | 0.00 |

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$0.00)

SUBMITTED BY

| Name (Print/Type) | Registration No. (Attorney/Agent) | Telephone | Date |
|-------------------|-----------------------------------|----------------|---------------|
| John A. Dhuey | 26,265 | (650)-564-5699 | July 13, 2001 |
| Signature | | | |

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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0950555-01301

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: MERRILL, Sonya

Application No.: NOT YET ASSIGNED

Filed: HEREWITH

For: HYDROMOROPHONE THERAPY

Group No.: 1619

Examiner: SHARAREH, S.

Assistant Commissioner for Patents

Washington, D.C. 20231

EXPRESS MAIL CERTIFICATE

"Express Mail" label number EL 523935288 US

Date of Deposit 07/13/2001

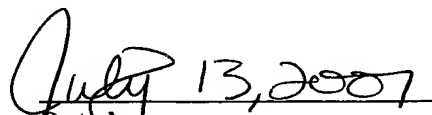
I hereby state that the following *attached* papers or fee

1. RETURN RECEIPT POSTCARD
2. UTILITY PATENT APPLICATION (1 PAGE)
3. FEE TRANSMITTAL FORM (1 PAGE)
4. DECLARATION AND POWER OF ATTORNEY FORM (3 PAGES)
5. REVOCATION AND NEW POWER OF ATTORNEY FORM W/ CERTIFICATE UNDER 37.CFR §3.73(B) (7 PAGES)
6. INFORMATION DISCLOSURE STATEMENT W/ INFORMATION DISCLOSURE CITATION (5 PAGES)
7. PRELIMINARY AMENDMENT

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. section 1.10, on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

MARIA E. VALENZUELA


Signature of person mailing paper or fee


Dated